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SAN FRANCISO	CO, CA 94111-3834	1								(Depositor's name)	
										(Signature)	
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APPLICATION NO.	FILING DATE	T T		FIRST NAMED INVENT	гor		ATTO	RNEY DOCKET NO.	CO	NFIRMATION NO.	
09/707,309	0/707.309 11/06/2000			Devendra Kalra	026970-012400US				9427		
TITLE OF INVENTION:				ND METHOD WITH		PREV. PAID ISSU		TOTAL FEE(S) DUE	-	DATE DUE	
APPLN, TYPE	SMALL ENTITY		E FEE DUE		OE		LILL	-\$755 \$1,		07/23/2009	
nonprovisional YES NO		\$755 \$1,510		\$0		\$0 •		\$1,51		.0 0112312009	
EXAMINER		ART UNIT		CLASS-SUBCLASS							
SMITS, TALIV	2626		704-008000					7	d Townsend		
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required. 				(1) the names of u or agents OR, alter (2) the name of a s registered attorney 2 registered patent listed, no name wil	2. For printing on the patent front page, list 1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 2) the name of a single firm (having as a member a egistered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is isted, no name will be printed. Townsend and Townsend and Crew LLP 2 3						
3. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE	PRINTED ON T	HE PATENT (print o	r type	e) tent If an accion	nee is id	tentified below the d	ocum	ent has been filed for	
PLEASE NOTE: Unle recordation as set forth (A) NAME OF ASSIC	ess an assignee is ident n in 37 CFR 3.11. Comp GNEE	oletion of	this form is NO	data will appear on α Γ a substitute for filing (B) RESIDENCE: (C)					ovam	ont has been med to	
VeriSign, Inc.				Mountain View, California							
Please check the appropri	ate assignee category or	categorie	es (will not be pr	inted on the patent):		Individual 🛛 C	orporati	ion or other private gr	oup ei	ntity Government	
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